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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

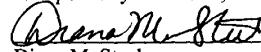
(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. INL-036DV (4643/36)

First Named Inventor Dahlbäck

Title NOVEL ANTICOAGULANT COFACTOR ACTIVITY

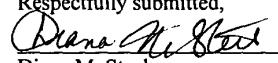
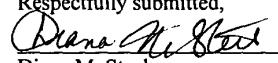
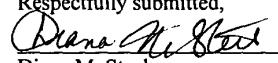
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APPLICATION ELEMENTS		ADDRESS TO: Box Patent Application Assistant Commissioner for Patents Washington, D.C. 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form 2. <input type="checkbox"/> Small Entity Status <input type="checkbox"/> Applicant claims small entity status <input type="checkbox"/> Status established in prior application and is still proper and desired 3. <input checked="" type="checkbox"/> Specification and Drawings [Total Pages 45] - Cover Page - (1 page) - Written Description - (33 pages) - Claims - (7 pages) - Abstract - (1 page) - Sheets of Drawings - (4 sheets) <input type="checkbox"/> Formal <input checked="" type="checkbox"/> Informal		ACCOMPANYING APPLICATION PARTS	
4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 3] a. <input type="checkbox"/> Newly executed (original) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> <i>[Note Box 5 below]</i>		8. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney 9. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
5. <input checked="" type="checkbox"/> Incorporation by Reference (usable if Box 4b is checked) The entire Disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.		11. <input checked="" type="checkbox"/> Preliminary Amendment (9 pages) <input type="checkbox"/> Drawings [Total Sheets] <input type="checkbox"/> Letter to Official Draftsperson Including Drawings [Total Pages]	
6. <input checked="" type="checkbox"/> Application Data Sheet		12. <input checked="" type="checkbox"/> Return Receipt Postcard	
7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Paper Copy (identical to computer copy) <input type="checkbox"/> CD (identical to computer copy) <input type="checkbox"/> Statement verifying identity of above copies		13. <input type="checkbox"/> Certified Copy of Priority Document(s) 14. <input type="checkbox"/> Deletion of Inventor(s) Signed statement attached deleting inventor(s) named in the prior application.	
17. <input checked="" type="checkbox"/> If a CONTINUING APPLICATION, amend the specification by inserting on page 1, before the first line, the sentence: --This is a <input type="checkbox"/> continuation <input checked="" type="checkbox"/> divisional of prior application Serial No. 08/500,917, filed on January 28, 1994, the entire disclosure of which is incorporated by reference herein.--		15. <input type="checkbox"/> CD in duplicate for large table or computer program. 16. <input checked="" type="checkbox"/> Other: Associate Power of Attorney	
18. <input type="checkbox"/> Priority - 35 U.S.C. 119 <input type="checkbox"/> Priority of application Serial No. _____ filed on _____ in _____ is claimed under 35 U.S.C. 119. <input type="checkbox"/> The certified copy has been filed in prior U.S. application Serial No. _____ / _____ on _____. <input type="checkbox"/> The certified copy will follow.			
CORRESPONDENCE ADDRESS		SIGNATURE BLOCK	
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100		Respectfully submitted,  Diana M. Steel Attorney for Applicants Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110	

2142806

FEE TRANSMITTAL
FY 2001

<i>Complete if Known</i>	
Application Serial Number	Not assigned
Filing Date	Herewith
First Named Inventor	Dahlbäck
Group Art Unit	Not assigned
Examiner Name	Not assigned
Attorney Docket No.	INL-036DV (4643/36)

METHOD OF PAYMENT		FEES CALCULATION (continued)																																																																																										
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other		3. ADDITIONAL FEES <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Large Entity</th> <th style="text-align: left; width: 15%;">Small Entity</th> <th style="text-align: left; width: 60%;">Fee Description</th> <th style="text-align: left; width: 10%;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>Fee (\$)</td><td>Fee (\$)</td><td></td><td></td></tr> <tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>2,520</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td>110</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>390</td><td>195</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>890</td><td>445</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1,390</td><td>695</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1,890</td><td>945</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>310</td><td>155</td><td>Notice of Appeal</td><td></td></tr> <tr><td>310</td><td>155</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>270</td><td>135</td><td>Request for oral hearing</td><td></td></tr> <tr><td>130</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>50</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>180</td><td>180</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>710</td><td>355</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>710</td><td>355</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td></td><td></td><td>Other fee (Specify)</td><td></td></tr> <tr><td></td><td></td><td>Other fee (Specify)</td><td></td></tr> </tbody> </table>			Large Entity	Small Entity	Fee Description	Fee Paid	Fee (\$)	Fee (\$)			130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	For filing a request for reexamination						110	55	Extension for reply within first month		390	195	Extension for reply within second month		890	445	Extension for reply within third month		1,390	695	Extension for reply within fourth month		1,890	945	Extension for reply within fifth month		310	155	Notice of Appeal		310	155	Filing a brief in support of an appeal		270	135	Request for oral hearing		130	130	Petitions to the Commissioner		50	50	Petitions related to provisional applications		180	180	Submission of Information Disclosure Statement		710	355	Filing a submission after final rejection (37 CFR 1.129(a))		710	355	For each additional invention to be examined (37 CFR 1.129(b))				Other fee (Specify)				Other fee (Specify)	
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2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.																																																																																												
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